

**ORDER FOR SUPPORT,
HEALTH INSURANCE
AND INCOME ASSIGNMENT**

Trial Court of Massachusetts

- ☐ District Court ☐ Probate & Family Court
☐ Juvenile Court ☐ Boston Municipal Court



DOCKET NUMBER

NAME, ADDRESS AND ZIP CODE OF OBLIGOR

NAME AND ADDRESS OF COURT DIVISION

COURT TELEPHONE NUMBER

SOCIAL SECURITY NUMBER OF OBLIGOR

NAME OF OBLIGEE

SOCIAL SECURITY NUMBER OF OBLIGEE

NAME, ADDRESS AND ZIP CODE OF EMPLOYER OR OTHER SOURCE OF INCOME

I. SUPPORT PAYMENT TERMS

- The above-named Obligor is **ORDERED**, after hearing or upon default, to provide support payments in the sum of \$ _____ ☐ weekly ☐ monthly. Payments shall begin on _____ date.
\$ _____ shall be considered current child support and \$ _____ current spousal support.
\$ _____ shall be applied against an arrearage of \$ _____ for child support and
\$ _____ for spousal support.
- The court found the Obligor to be in arrears for 12 or more weeks. ☐ yes ☐ no
- Upon satisfaction of the above arrearage, the required payment shall be \$ _____ ☐ weekly ☐ monthly
- Payments shall be made payable to: _____
Payments shall be sent to: _____
- If order is on behalf of more than one payee, specify allocation: _____
- ☐ Check here if this is a modification which supersedes an existing order.

II. HEALTH INSURANCE COVERAGE TERMS

- ☐ Whereas the Obligor has health insurance or other health coverage available through an employer or organization or has such insurance or coverage available to him at reasonable cost that may be extended to cover the child(ren) or spouse for whom support is ordered, the Obligor is ordered to provide health insurance, effective _____ date. Policy No. _____ Insurer _____
- Should health insurance not be provided for any period for which it is ordered, the amount of the order for current support is increased for that period to \$ _____ ☐ weekly ☐ monthly
- ☐ Whereas the above conditions are not met, health insurance is not ordered for said child(ren) and/or spouse.

III. INCOME ASSIGNMENT TERMS

- This income assignment is:
☐ to take effect immediately. (It will take effect on the pay period beginning 3 days after the employer or other source of income receives this order.)
OR
☐ suspended. (Pursuant to a written agreement of the parties, or finding of the court that good cause exists to suspend the order, payments will be made directly by the Obligor as provided above. However, state law requires the automatic implementation of the assignment **without further hearing** if at any time the Obligor owes an amount equivalent to 14 days' worth of support. At that time, the Obligor will receive notice and be informed as to the procedure for requesting a hearing pursuant to G.L. c. 119A, § 12(d),(e).)
- The deduction shall be \$ _____ ☐ weekly ☐ monthly (but see Section II, item 2 above)
- Make payments payable to: _____
Send to: _____
- Payments must be sent by the employer or other source of income within 3 days of the date the Obligor is paid.
- If an arrearage accrues, the amount of the assignment may be increased by 25% until such arrearage is paid off.

**JUDICIAL
ORDER
FOR
SUPPORT**

I hereby find that the above-named Obligor is required to provide support and maintenance in the above matter. I therefore order that said Obligor and **any current or future employer, or other source of income**, comply with the terms specified in this order.

SIGNATURE OF HEARING OFFICER

DATE

SIGNATURE OF JUSTICE

DATE